				_	
Fill	in this information to ident	tify your case:			
Uni	ted States Bankruptcy Court	for the:			
MIE	DDLE DISTRICT OF PENNS	YLVANIA	_		
Cas	se number (if known)		Chapter 11		
				Check if this an amended filing	
V(ore space is needed, attach	on for Non-Individu a a separate sheet to this form. On the tate document, Instructions for Bankrup	top of any additional pages, write the	e debtor's name and case number	4/19 r (if known).
1.	Debtor's name	Fox Subacute at Clara Burke, Inc	b.		
2.	All other names debtor used in the last 8 years				
	Include any assumed names, trade names and doing business as names				
3.	Debtor's federal Employer Identification Number (EIN)	23-3088332			
4.			Mailing addre business	ess, if different from principal plac	ce of
		120 S Filbert Street	251 Stenton		
		Mechanicsburg, PA 17055 Number, Street, City, State & ZIP Code		leeting, PA 19462 mber, Street, City, State & ZIP Code	
		Cumberland	·	principal assets, if different from p	
		County	place of busi	ness	•
				n Avenue Plymouth Meeting, P et, City, State & ZIP Code	A 19462
			Number, ones	et, Oity, State & Zii Gode	
5.	Debtor's website (URL)				
6.	Type of debtor	Corporation (including Limited Links	ility Company (LLC) and Limited Liabili	ty Partnership (LLP)\	
		■ Partnership (excluding LIP)	inty Company (LLC) and Limited Elabilit	1 ATTHETSTIP (LLF))	

☐ Other. Specify: _

Deb	1 Ox Oubuouto at t	Clara Bur	ke, Inc.	Case number (if known)			
	Name							
11.	Why is the case filed in this district?	Check a	Check all that apply:					
	uns district:		Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.					
		— A	A bankruptcy case concerning de	ebtor's affiliate, general partner, or partners	hip is pending in this district.			
12.	Does the debtor own or have possession of any	■ No						
	real property or personal property that needs immediate attention?	I ☐ Yes.	Answer below for each prope	erty that needs immediate attention. Attach	additional sheets if needed.			
			Why does the property need immediate attention? (Check all that apply.)					
			☐ It poses or is alleged to po What is the hazard?	ose a threat of imminent and identifiable ha	zard to public health or safety.			
☐ It needs to be physically secured of				ecured or protected from the weather.				
				ds or assets that could quickly deteriorate of meat, dairy, produce, or securities-related	or lose value without attention (for example, assets or other options).			
			☐ Other					
			Where is the property?					
				Number, Street, City, State & ZIP Code				
			Is the property insured?					
			□ No					
			Yes. Insurance agency					
			Contact name Phone					
	Statistical and admi	nistrative	information					
13.	Debtor's estimation of available funds		Check one:					
Funds will be available for distribution to unsecured creditors.								
\square After any administrative expenses are paid, no funds will be available to uns				o unsecured creditors.				
11	Estimated number of			П 4 000 5 000	П от оод 50 ooo			
14.	creditors	□ 1-49 □ 50-9		□ 1,000-5,000 □ 5001-10,000	☐ 25,001-50,000 ☐ 50,001-100,000			
		1 00-		☐ 10,001-25,000	☐ More than100,000			
		□ 200-	-999					
15.	Estimated Assets	□ \$0 -	\$50,000	■ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
			,001 - \$100,000	☐ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion			
			0,001 - \$500,000 0,001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
			· · ·	— \$100,000,001 - \$300 Hillion	·			
16.			\$50,000	■ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
			,001 - \$100,000	☐ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion			
			0,001 - \$500,000 0,001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			

Fox Subacute at Clara Burke, Inc.	Case number (if known)	
Name		

Request for Relief, Declaration, and Signatures

Title

President

WARNING - Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

17. Declaration and signature of authorized representative of debtor

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

11/01/2019 Executed on MM / DD / YYYY Signature of authorized representative of debtor

James M. Foulke Printed name

18. Signature of attorney

s/ Robert E. Chernicoff	Date 11/01/2019					
Signature of attorney for debtor	MM / DD / YYYY					
Robert E. Chernicoff, Esquire 23380						
Printed name	rinted name					
Cunningham, Chernicoff & Warshawsl	ky, P.C.					
Firm name						
2320 North Second Street						
Harrisburg, PA 17110						
Number, Street, City, State & ZIP Code						
Contact phone (717) 238-6570	Email address					

23380 PA

Bar number and State

Case number (if known)

Name

Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
MIDDLE DISTRICT OF PENNSYLVANIA	
Case number (if known)	Chapter 11

☐ Check if this an amended filing

FORM 201. VOLUNTARY PETITION

Pending Bankruptcy Cases Attachment

Debtor	Fox Nursing Home Corp.			Relationship to you	Affiliate
District	Middle District of Pennsylvania	When	11/01/19	Case number, if known	1:19-bk-04715
Debtor	Fox Subacute at Mechanicsburg, LLC	3		Relationship to you	Affiliate
District	Middle District of Pennsylvania	When	11/01/19	Case number, if known	1:19-bk-04714